



# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

## Complete if Known

Application No.	10/006,166
Filing Date	December 4, 2001
First Named Inventor	Pavel I. LAZAREV
Examiner Name	Hon, Sow Fun
Group Art Unit	1772

Total Number of Pages in This Submission	116	Attorney Docket No.	A-71153 (477077-8)
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## ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	<b>Return postcard</b>
<input checked="" type="checkbox"/> Form SB/8A and (4) references	<input type="checkbox"/> CD, No. of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name	Tianjun Hou, Reg. No. 51,821 DORSEY & WHITNEY LLP 555 California Street, Suite 1000 San Francisco, CA 94104-1513 (415) 781-1989	Customer Number 32940
Signature		
Date	March 10, 2006	

## CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with Sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:				3/10/06
Typed or printed name	Vikki Athen			
Signature		Date	March 10, 2006	



**AMENDMENT  
FEE CALCULATION  
(FY 2005)**

**Complete if Known**

Application No.	10/006,166
Filing Date	December 4, 2001
First Named Inventor	Pavel I. LAZAREV
Group Art Unit	1772
Examiner Name	Hon, Sow Fun
Atty. Docket Number	A-71153 (463031-8)

**Claims as Amended in Response to Office Action dated:** **October 13, 2005**

METHOD OF PAYMENT (Check One)		AMENDMENT FEE CALCULATION (Continued)			
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account No.: <u>50-2319</u> Deposit Account Name: <u>DORSEY &amp; WHITNEY LLP</u> <input checked="" type="checkbox"/> Charge any additional fee required under 37 C.F.R. 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status (see 37 C.F.R. 1.27)		<b>3. ADDITIONAL FEES</b>			
2. <input type="checkbox"/> Check Enclosed		<b>Large Entity Fee</b>	<b>Small Entity Fee</b>	<b>Fee Description</b>	<b>Fee Paid</b>
		120	60	Extension for reply within first month	
		450	225	Extension for reply within second month	225
		1,020	510	Extension for reply within third month	
		1,590	795	Extension for reply within fourth month	
		2,160	1,080	Extension for reply within fifth month	
		500	250	Notice of Appeal	
		500	250	Filing a brief in support of an appeal	
		1,000	500	Request for oral hearing	
		130	65	Terminal Disclaimer Fee	
		500	250	Petition to revive – unavoidable	
		1,500	750	Petition to revive – unintentional	
		790	395	Utility/Reissue issue fee (inc. 10 advance copies)	
		130	130	Petitions to the Commissioner	
		180	180	Submission of IDS	180
		790	395	Request for Continued Examination (RCE)	
		Other fee (specify):			
		<b>Subtotal (2)</b>			<b>\$405</b>
		<b>Total Amount of Payment:</b>			<b>\$405</b>

1. EXTRA* CLAIM FEES				
Claims Remaining after Amendment	Highest Number Previously Paid for	Present Extra	Fee from Below*	Additional Fee
Total 15	55	=	x 25	=
Indep. 1	3	=	x 100	=
First Presentation of Multiple Dependent Claim			x	=
<b>Subtotal (1)</b>				

\*Calculation of Extra Claim Fees

Large Entity Fee	Small Entity Fee	Fee Description
50	25	Claims in excess of 20
200	100	Independent claims in excess of 3
360	180	Multiple dependent Claim
200	100	Reissue independent claims over original patent
50	25	Reissue claims in excess of 20 and over original patent

**Submitted by:**

Name: Tianjun Hou Reg. No.: 51,821 Telephone: 650-857-1717

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Signature: 

Date: March 10, 2006